<del>, , , ,</del>		_ <u>DE2</u>	AVU	IICA	115 (4	<u>ት</u>	<b>Y</b> .,				
PAT	ENT APPLICATI	ON FEE	DETER! ober 1, 2	HINAT COO	TON REC	OR	— D	Ambie		Doctor N (77): (0-2)	26
	CLAIMS A			1			CHAIL	ENTITY			<u> </u>
TOTAL CL	ARIC	(Cohn	nn 1)	(Co	umn 2) .				0	HTO Lamba R	ER THAN LENTITY
		17					RATE	FE		RATE	
FOR		NUMBER FLED		NUM	NUMBER EXTRA		BASE F		$\exists$		
TOTAL CHARGEABLE CLAIMS		17 minus 20=		·ø	Ø		X3.0=	+	$\dashv$	-	-
INDEPENDENT CLAIMS		= 8 eurim S		0	10		-	-	⊣°	A X\$18-	
WULTIPLE (	DEPENDENT CLAIM P					ł	X40=	4	_ 0	R X80-	
" If the difference in column 1 is less than zero, enter "O" in column 2						J	+135=	1	0	R +270=	
fond	+				column 2		TOTAL	35	3	R TOTAL	+
5-120	CLAIMS AS	MENDE								OTHE	R THAN
	CDUMS		(Colum		(Column 3)		SHALL	ENTITY	OF		ENTITY
Total Independ	REMAINING AFTER		PREVIO	ER	PRESENT		RATE	ADDI- TIONA			ADDI
Total	AMENDMENT		PAID		EXTRA	П		FEE		PATE	TIONAL
Total	·an	AGINUS	1-2	<u> </u>	- 2		XI.	50,0	OF	XS SE	
EIDOT D		Minus		3	·.		xis	1	1	T/X	<del>  X  </del>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del>}</del>	Hot		$\star \star$
							160		OR	+#16-	//
1011	-05						TOTAL DOIT, FEE		OR	YOTAL AODIT, FEE	
	(Column 1)		(Colum		(Column 3)						
Total Independ	REMAINING AFTER		NURATE	ER	PRESENT	ſ		ADDI-	1		ADDI-
	AMENOMENT		PREVIO PAUD F		EXTRA		RATE	TIONAL	·	RATE	TIONAL
Total		Minus	- 2	7	•		X\$ 9=		1_	XS18=	FEE
Independ		Minus	3		• -	ŀ			1 <sub>OB</sub>		
PHAST PA	ESENTATION OF MU	LTIPLE DE	PENDENT	CLAIM		ŀ	X40-		OR	X80-	
<b>.</b>		•					+135=		OR	+270=	
ته <u>ح</u> ی						Al	TOTAL DOTT, FEE		OR	TOTAL	
1.	(County 1)		(Colum	n 2)	(Column 3)					ADDIT. FEE	
	REMARKING T		HUGHE		PRESENT	Г		ADDI-	1	<del></del>	4001
	AFTER AMENDMENT		PREVIOU PAID FO	SLY	EXTRA	ı	PATE	TIONAL		RATE	ADDI- TIONAL
Total	- 11	Minus	11			-		FEE			FEE
Independe	m · 2	Minus .	3	_		L	X\$ 9=		OR	X\$18=	
FIRST PR	ESENTATION OF MU		ENDENT C			L	X40-		OR	X80=	
The entry in sciums 1 is test than the entry in column 2, units "O" in column 3.  I the "Highest Number Provincialy Paid For DN THIS SPACE is less than 20, enter "20."							135-		OR	+270=	
1 De 20	Number Previously Peld	SEAT BUT TO	STREET BY		A. C	AD	OTT. FEE		OR	TOTAL LOOK, FEE	1

FORM PTO-076 (Res. 8700)